University of Washington, Seattle
Services & Activities Fee
Fiscal Year 2026 Budget Request

Unit Leads

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Budget Request Highlights

In this section, please list all line items for any changes in request amount greater than $1000, along with a short description of each line item and the amount requested. For all other changes under $1000, please list the total summed figures in a final "miscellaneous expenses" item at the bottom. Please ensure that all the SAF funded line items below and previous SAF allocation total add up to the requested amount. Our goal with this section is to provide an overview of the current financial state, along with any changes in SAF funding that are being requested this year.

Each unit's FY26 request may only represent a maximum increase of 6% or $35,000 over the unit's allocation for FY25 (whichever is higher in context of the unit's FY25 allocation).

While we would love to fund everyone's full request, SAF is financially constrained by the Washington State Legislature. RCW 28B.15.069 limits the amount that the Services and Activities Fee (SAF) is allowed to increase each year. For FY26, the SAF amount can be increased by a maximum of 3.55%.

Our unit's request in FY22 was **$000.00** and our award was **$000.00**.
Our unit's request in FY23 was **$6,251,193** and our award was **$5,786,276.**
Our unit's request in FY24 was **$6,433,196** and our award was **$6,263,702.**
Our unit's request in FY25 was **$6,764,797** and our award was **$6,552,564**.
Our request for FY26 is **$6,945,718,** which represents a **6%** increase **($393,154)** from FY25**.**

In this section, please break each increase into its own sections (e.g. wage & benefits changes, increases in current employee hours/FTE, funding new positions, etc.). Example sections have been provided (you may delete the example sections).

Mandatory Wage & Benefits Increases **$324,174**
Both Classified and Professional staff salaries are projected to increase by 3% in FY26. The benefit load rates are projected to remain the same at 34.4% and 30.3% respectively. Hourly salaries for Husky Health are also projected to have 3% increases in FY26, and the benefit load rate is projected to remain at 23%.

Wage & Benefits Increases **$451,992**

In addition to the standard mandatory increases, Husky Health added four new providers part way through FY25, and their full annual salaries are reflected in FY26.

Increase in Revenue **-$459,988**

Insurance revenue is projected to increase approximately 7% in FY26, largely due to the new providers added in FY25. The new providers added part way through FY25 have a ramp up period while onboarding where their revenue from billing insurance is less than normal.

Operating Increases **$76,976**

This is a projected 2% increase in operating expenses.

Full Budget Overview & Justification

In this section, you will have the opportunity to explain your request in greater detail via the guiding question(s) below. You are encouraged to use graphs, charts, or other visual tools. Your goal for this section is to provide the SAF committee (and the public) with sufficient (and substantive) context and justification for the use of these funds.

1. **How are expenditures distributed across the programs and/or services your unit offers? Please provide a general overview of how much spending is allocated to each category of expense, such as staffing, materials, etc., as is applicable.**

The annual allocation of SAF funding received by Husky Health Center (HHC) offsets the operating expenses of the unit. SAF funding is applied to the balance sheet in an equal portion each month to allow for consistent budgeting and even distribution of this predictable revenue stream. While HHC generates revenue from billing for medical visits with physicians and providers in the clinic, this alone would not cover the salaries, wages, medical equipment, supplies, and costly pharmaceuticals required to run a medical clinic. Expenditures for programs and services can fluctuate year-over-year due to seasonal variations in demand (i.e. flu seasons, academic breaks) and staffing levels. The above projections for how funding will be applied to offset the operating expenses of HHC is based on a rolling historical analysis of trends in utilization at HHC and expected appointment volume in FY26.

2. **Please give a summary elaborating on how SAF Funding has been used to support students** (*Please refer to dollar amounts in this discussion when possible*).

a. In what ways has SAF funding been essential to supporting your unit's on-going services and role in the university? Please provide at least one specific example of a program/service.

The most significant benefit realized by students at HHC is the preservation of rapid access to medical care. Because SAF funding is used to benefit students by offsetting the general overhead and operating expenses of HHC, providers and staff can focus on accessible and inclusive care for students. As a recipient of SAF funding, HHC is mindful that stewardship and equity are central to our mission. HHC offers a wide range of services, programs, and benefits to students that would not be possible without SAF funding. There are several examples of services that are unique and reserved only for current, SAF-paying students, which include:

- Priority access when establishing care and scheduling appointments in the HHC Primary Care and Same Day clinics, via the process detailed above in this eligibility policy.
- No out-of-pocket expense for the office visit portion of the first encounter each quarter.
- Consultations with HHC insurance navigators.
- Counseling visits with HHC's Patient Healthcare Advocate on sexually transmitted infections, contraception, and reproductive health.
- Safer sex and harm-reduction supplies (condoms, lube, dental dams, naloxone, fentanyl test strips, etc.)

This list is not exhaustive. These and other services at HHC are reserved for students enrolled at UW Seattle who have paid SAF.

b. How have your unit's services and programming changed over time, and how have you adapted the use of SAF funding?

The most significant change over time has been the codification of the above benefits into a policy which defines eligibility for services at HHC. While HHC closed to new, non-student patients in 2021, this was never formally captured in policy. Linking eligibility for services with a student's status as a current, SAF-paying UW Seattle student has been an important step in preserving access to HHC for those who are paying for it. This policy officially went into effect on 01 January 2025, even though it reflects 4+ year of a gradual change in focus to be a more student-centered unit.

c. Are there programs/services that SAF has funded in the past that your unit no longer provides?

No / not applicable

d. Are you currently using your unit's allocation for new programs or services that were not originally requested as an item in your SAF budget request?

In FY25 we have partnered with ASUW to expand access to screening for sexually transmitted infections for students without symptoms. The funding for this, provided by SAF, allows us to develop programs that are low or no-cost to students to encourage them to seek preventative services that benefit the public health of the campus community. With additional funding in excess of what e project to cover our general operating and overhead expenses, we can undertake more projects like this, especially in cooperation with student government and other SAF-funded units on campus to the benefit of students.

3. **What is the nature of your reserves/fund balances? For what purposes do you hold reserves? How were they accrued?** (Reserves/Fund balances are termed and considered differently in every unit. If you are unsure of what these terms mean or would like clarification on anything, please reach out and ask.)

HHC aims to end each budget year in positive territory, and additional retained revenues go to our reserve fund account. As was seen in the pandemic, rare but catastrophic events can create the need for large and sudden drawdowns of reserve funds in order to maintain the same high level of services during times of medical emergencies. We consider our reserve fund to currently be at a healthy level, which will provide us some opportunity for limited reinvestment of these funds for one-time capital expenses.

Budget Breakdown

In this section, please include a breakdown of your requested revenues/expenses for FY26 and your unit's budget for FY25.

The template, instructions, and an example can be found here: [SAF FY26 Budget Breakdown.xlsx]

BUDGET BREAKDOWN

	FY26 Request	FY25 Expected	FY25 Actuals Notes
REVENUES			
SAF Funding	$6,945,718.00	$ 6,552,564.00	6% increase
State/University Funding	$ 460,000.00	$ 452,004.00	Funding for IVP program
Self-Generated Revenue	$6,838,742.00	$6,386,750.00	Variable insurance revenue. Project 7% increase in FY26, new providers onboarded
Grants/Subsidies	$79,872.00	$79,872.00	Proviso
Interest Revenue			
Other Revenue	$30,000.00	$30,000.00	Providing services to UW/Seattle Children's employees
Total Revenue	$ 14,354,332.00	$ 13,501,190.00	
Change in Revenues	$ 853,142.00	6.32%	

	FY26 Request	FY25 Expected	FY25 Actuals Notes
EXPENSES			
Salaries & Wages:			
Classified	$ 4,852,258.00	$ 4,407,394.00	
Professional	$ 2,822,994.00	$ 2,607,185.00	
Graduate Appointments			
Temporary	$185,988.00	$ 182,183.00	
Other Salaries & Wages			
Total Salaries & Wages	$ 7,861,240.00	$ 7,196,762.00	
Retirement & Benefits:			
Classified	$ 1,669,176.00	$ 1,516,144.00	
Professional	$ 855,367.00	$ 789,977.00	
Graduate Appointments			
Temporary	$42,777.00	$41,902.00	
Other Retirement & Benefit			
Total Retirement & Benefit	$ 2,567,320.00	$ 2,348,023.00	
Operations:			
Personal Service Contract			
Other Contract Services	$ 1,183,966.00	$ 1,160,751.00	
Grants & Subsidies			
Travel	$ 13,872.00	$13,600.00	
Supplies	$2,266,445.00	$2,222,005.00	
Other Operations	$461,489.00	$452,440.00	2% increase in operating costs for inflation
Total Operations	$ 3,925,772.00	$ 3,848,796.00	FY25 Salary savings from admin vacancies
Total Expenses	$ 14,354,332.00	$ 13,393,581.00	
Change in Expenses	$ 960,751.00	7.17%	
Revenue - Expenses	$ -	$ 107,609.00	

Information on Other Revenues:

If you have other sources of revenue, please give an overview of those anticipated revenues (including new sources) and how you expect them to change in the coming years. If relevant, include a breakdown of services & positions funded by SAF vs other revenues.

N/A

Additional Questions

1.
    a. **How would you adjust your operations if you did not receive your full request? Please elaborate on the potential impact on staffing and services.**

Any gap in funding from SAF would require significant operational modification to the business model at HHC. Historically, SAF has provided a very consistent share of the funding for this unit. Any decrease, whether sudden or staged, would necessarily result in tangible loss of access to the students as wait times for appointments would increase. Certain pre-paid services, such as the above-noted policy related to the first visit per quarter, would likely be the first cost-saving measure implemented in the event of a reduced allocation.

    b. **What if you received an amount less than your FY25 allocation?**

As above. Additionally, we project appointment growth and increased utilization as a share of enrolled students. Reducing the allocation would have deleterious effects on access to healthcare for students on the Seattle campus.

    c. **What student services/programs are integral to your mission that you would not cut even if you received an amount less than your FY25 allocation?**

Considering the mission of healthcare, all elements of HHC are mission-critical and any single service or program would be difficult to eliminate or reduce without having an adverse effect on students. Certain sub-units of HHC, such as travel medicine and physical therapy, however, could potentially be considered non-essential in the event of very deep budget cuts.

2. **If financial resources were not a restriction, what is one program/service your unit would add/expand on to enhance students' experience at the University?**

Students thrive and succeed when health and wellbeing are infused into every element of the campus experience. While HHC is currently very focused on the provision of preventative, acute, and chronic medical care, we would like to explore partnerships with other campus units on how to build more supportive infrastructure around a culture of wellbeing. It can be difficult to demonstrate a short-term return on investment with this kind of strategic thinking, abut a move to a more integrated, holistic, and equitable model of care and prevention is an aspirational goal for HHC.

3. **How does your unit ensure that student fees do not subsidize non-student, academic, research, and other costs that are the primary responsibility of the University and its colleges?**

Please see above comments about the eligibility policy, which is available upon request. Due to the long history of HHC as an on-campus clinic, we do have some established non-student patients at HHC who include faculty, staff, family members, and community patients. Our commitment to them at the time they were welcomed into the practice was that we would care for them, so while we are closed to taking any new non-student patients, you may continue to occasionally see a few non-students in the waiting room at HHC as we fulfill our commitment to the rest of the Husky community. These patients are self-insured and revenue from their visits at HHC is accounted for in our budget.

4. **How are you utilizing the SAF logo? In what ways do you spread awareness of your affiliation with SAF?**

We have developed an innovative and aggressive marketing campaign that brands HHC as "On Campus. For Students." We are placing the SAF logo in these advertisements, on our website, and in our presentations to parents, first year programs, admitted students, and others so they know from day one that this is a student-funded unit, by and for students.

5. **If you are projecting a net deficit for FY26, please provide additional context for this net deficit (e.g. reallocation of carryover funds from previous fiscal years, extraordinary expenses necessary to meet operational needs, etc.).** *(Optional – Answer "N/A" if not relevant to your unit)*

Not applicable

6. **When projecting out 1-3 fiscal years, what challenges, if any, do you foresee for your unit? How could SAF be helpful in navigating these challenges?** *(Optional – Answer "N/A" if not relevant to your unit)*

The single greatest challenge facing the long-term financial health of HHC is increased growth of salaries and wages. Annual increases in SAF funding, insurance reimbursement, and inflation all combine to make this a constant pressure. Combined with the high cost of living in Seattle, we already find it difficult to recruit employees at all levels and lag the competitive salaries even within our own UW Medicine system. We will strive to pay our team equally and fairly with their peers, but doing so will cause annual increases that require constant attention.